

Hepatitis C Testing Guidelines

Washington State Clinical Laboratory Advisory Council

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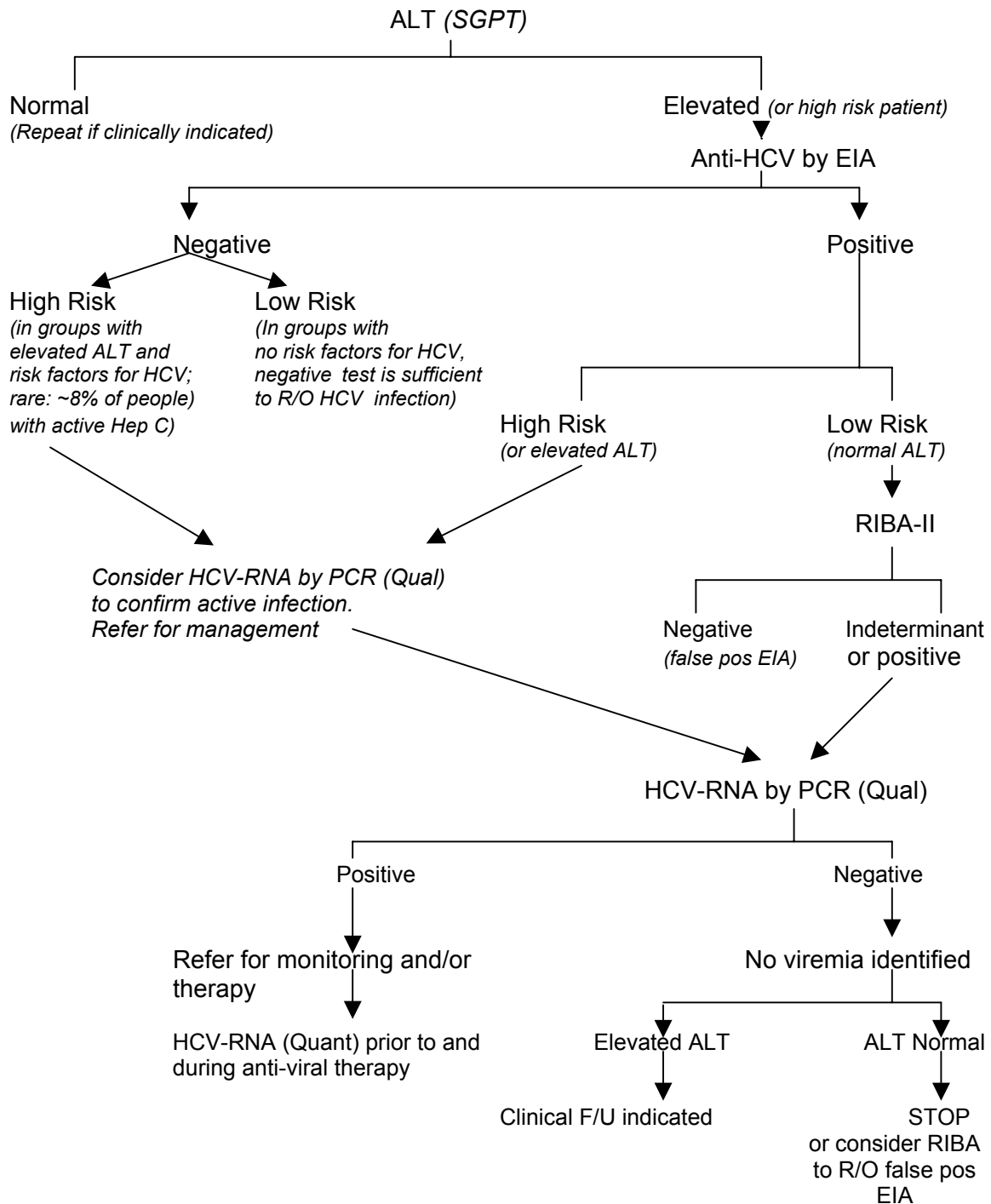
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FOR EDUCATIONAL PURPOSES ONLY

The individual clinician is in the best position to determine which tests are most appropriate for a particular patient.

Screening

(See chart on screening recommendations for HCV infection on reverse side)



Hepatitis C Virus Genotyping: The HCV genotyping assay can be used as a guide to duration of therapy and can affect a patient's long-term response to interferon (IFN- α).

(Over for screening recommendations)

Screening Recommendations for Hepatitis C Virus (HCV) Infection

Persons who should be tested routinely for HCV infection based on their risk for infection:

- Persons who ever injected drugs, including those who injected once or a few times many years ago and do not consider themselves as drug users
- Persons with selected medical conditions, including:
 - persons who received clotting factor concentrates produced before 1987
 - persons who were ever on chronic (long-term) hemodialysis; and
 - persons with persistently abnormal ALT levels
- Prior recipients of transfusions or organ transplants, including:
 - persons who were notified that they received blood from a donor who later tested positive for HCV infection
 - Persons who received a transfusion of blood or blood components before July 1992, and
 - Persons who received an organ transplant before July, 1992

Persons who should be tested routinely for HCV infection based on a recognized exposure:

- Healthcare, emergency medical, and public safety workers after needle sticks, sharps or mucosal exposures to HCV-positive blood
- Children born to HCV-positive women

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